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Image# 202104219445078155

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Th	nan An Authoriz	ed Committe	ee		Office Use Only	/
NAME OF     COMMITTEE (in full)	TYPE OR PRI	_	example: If typin ever the lines.	ng, type	12FE4M	[5	
WOMEN SPEAK	OUT PAC						
ADDRESS (number and st	reet) 2800 Shirling	ton Rd					
Check if differer than previously reported. (ACC)	Suite 1200 Arlington				VA	22206	]-[
2. <b>FEC IDENTIFICATI</b>	ON NUMBER ▼	CITY ▲			STATE A	ZIP C	CODE A
C C00530766		3. IS THIS REPOR		NEW N) <b>OR</b>	AM (A	MENDED )	
4. TYPE OF REPOR (Choose One)  (a) Quarterly Reports  April 15 Quarterly Re	Report Due Or	: Mar 20 (M	13)	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep Oct	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only)  Dec 20 (M12) (Non-Election Year Only)  Jan 31 (YE)
July 15 Quarterly Re October 15 Quarterly Re January 31 Year-End Re	eport (Q2)  Preport (Q3)	-Day RE-Election sport for the:	Primary (12F		General Special		
July 31 Mid- Report (Non Year Only) ( Termination (TER)	Year -election MY) (d) 30 PC	-Day OST-Election oport for the:  Election on	General (300	G) /	Runoff (	in the	
5. Covering Period	03 / 01	2021	through	M M	31	2021	
I certify that I have exam Type or Print Name of Tr	Gross, Jenn		nowledge and I	pelief it is tru	ue, correct an	d complete.	
Signature of Treasurer	Gross, Jennifer, , ,		[Electronically	v Filed] [	Date 04	20	2021
NOTE: Submission of false	, erroneous, or incomp	lete information may	subject the pers	son signing t	nis Report to t	he penalties of	52 U.S.C. § 30109
Office Use Only						FEC FO	

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
V	Vrite or Type Committee Name		
\	WOMEN SPEAK OUT PAC		
R	Report Covering the Period: From:	M M / D D / Y Y Y Y Y Y TO:	03 / 31 / 2021
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2021		72764.90
	(b) Cash on Hand at Beginning of Reporting Period	. 11778.81	
	(c) Total Receipts (from Line 19)	. 4871.00	229927.30
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	. 16649.81	302692.20
7.	Total Disbursements (from Line 31)	2259.76	288302.15
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	. 14390.05	14390.05
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	. 170081.18	
	This committee has qualified as a mul	lticandidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### WOMEN SPEAK OUT PAC

Receipts  Iner than loans) From: Inersons Other Ine	COLUMN A Total This Period  2075.00  2796.00  4871.00  0.00  0.00  0.00  0.00  0.00	COLUMN B Calendar Year-to-Date  155786.60 31160.95 186947.55 0.00 186947.55 0.00 0.00 0.00
ersons Other al Committees (use Schedule A)	2796.00 4871.00 0.00 0.00 4871.00 0.00	31160.95 186947.55 0.00 0.00 186947.55 0.00 0.00
al Committees (use Schedule A)	2796.00 4871.00 0.00 0.00 4871.00 0.00	31160.95 186947.55 0.00 0.00 186947.55 0.00 0.00
ed	2796.00 4871.00 0.00 0.00 4871.00 0.00	31160.95 186947.55 0.00 0.00 186947.55 0.00 0.00
ed	2796.00 4871.00 0.00 0.00 4871.00 0.00	31160.95 186947.55 0.00 0.00 186947.55 0.00 0.00
add (a)(i) and (ii)	4871.00 0.00 0.00 4871.00 0.00 0.00	186947.55 0.00 0.00 186947.55 0.00 0.00
add (a)(i) and (ii)	4871.00 0.00 0.00 4871.00 0.00 0.00	186947.55 0.00 0.00 186947.55 0.00 0.00
y Committees	0.00 0.00 4871.00 0.00	0.00 0.00 186947.55 0.00
y Committees	0.00 0.00 4871.00 0.00	0.00 0.00 186947.55 0.00
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al Committees Cs) utions (add Lines and (c)) (Carry e 33, page 5)  ffiliated/Other s	4871.00 0.00 0.00	186947.55 0.00 0.00
cs)	4871.00 0.00 0.00	186947.55 0.00 0.00
utions (add Lines and (c)) (Carry e 33, page 5)  iffiliated/Other s ed	0.00	0.00
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eds Received	0.00	0.00
eds Received	0.00	0.00
eds Received	0.00	0.00
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s Received	4 4 4	
	0.00	0.00
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ung Expenditures		
es, etc.)		
ine 37, page 5)	0.00	42979.75
	45 45	45 45
1 '	0.00	0.00
eceipts	4 4	4 4 4
	0.00	0.00
on-Federal and Levin Funds	4 4	4 4
ule H3)	0.00	0.00
from Schedule H5)	0.00	0.00
_		
s (add 18(a) and 18(b))	0.00	0.00
	ibutions Made dates and Other ees cecipts est, etc.) on-Federal and Levin Funds Account ule H3)  (from Schedule H5) s (add 18(a) and 18(b))  dd Lines 11(d), 6, 17, and 18(c))  ceipts (c) from Line 19)	0.00   0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)	.5 1.110 1 51104	Jaionaa Tear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	2109.76	287947.15
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))	2109.76	287947.15
CommitteesContributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
(use solicule i )	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	150.00	355.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	150.00	355.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 3010 <sup>-1</sup> (a) Allocated Federal Election Activity (from Schedule H6)	1(20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,	, , , , , , , , , , , , , , , , , , , ,	,
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2259.76	288302.15
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	2259.76	288302.15

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 4871.00 186947.55 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds 150.00 355.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 186592.55 4721.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures 2109.76 287947.15 (add Line 21(a)(i) and Line 21(b)) .......▶ 37. Offsets to Operating Expenditures 42979.75 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 2109.76 244967.40 (subtract Line 37 from Line 36) ......

Use separate schedule(s) for each category of the Detailed Summary Page

FC	)R	LINE	NU	MBER	:	PAGE		6	OF	18
(check only one)										
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		d by any person for the purpose of soliciting contributions of solicities to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC								
Full Name of Individual (Last, First, Middle Ausfahl, Matthew, , ,  Mailing Address 2955 Santos Lane 305								
City	State Zip Code	03 19 2021 Transaction ID : SA11Al.41130						
Walnut Creek								
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period  75.00							
Name of Employer (for Individual) GEO GROUP	Occupation (for Individual Social worker	) Memo Item						
Primary General  Other (specify) ▼								
Full Name of Individual (Last, First, Middle Casperson, Carolina, , ,  Mailing Address 10 Boathouse Close	Date of Receipt  03 06 2021							
City	City State Zip Code							
Mount Pleasant	SC 29464	Transaction ID : SA11AI.41062  Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	50.00						
Name of Employer (for Individual) Self-Employed	Occupation (for Individual Musician	) Memo Item						
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	500.00						
Full Name of Individual (Last, First, Middle Casperson, Carolina, , ,	Initial) or Full Organization Name	Date of Receipt						
Mailing Address 10 Boathouse Close		03 13 2021						
City  Mount Pleasant	State Zip Code SC 29464	Transaction ID : SA11AI.41074  Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	50.00						
Name of Employer (for Individual) Self-Employed	Occupation (for Individual Musician	) Memo Item						
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	550.00						
SUBTOTAL of Receipts This Page (optional).								
TOTAL This Period (last page this line numb	er only)							

FOR LINE NUMBER: PAGE 7 OF Use for Det

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e separate schedule(s)	(check only one)										
each category of the tailed Summary Page	×	11a		11b		11c		12			
and community and		13		14		15		16		17	

or for commercial purposes, other than using the	Statements may not be sold or used by any personal name and address of any political committee to	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle I Casperson, Carolina, , ,  Mailing Address 10 Boathouse Close  City  Mount Pleasant  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Self-Employed  Receipt For:  Primary  General  Other (specify)	State Zip Code SC 29464  C Occupation (for Individual) Musician  Aggregate Year-to-Date  600.00	Date of Receipt  03 20 2021  Transaction ID : SA11AI.41131  Amount of Each Receipt this Period  50.00  Memo Item
Full Name of Individual (Last, First, Middle I Casperson, Carolina, , ,  Mailing Address 10 Boathouse Close  City Mount Pleasant  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Self-Employed  Receipt For:  Primary General Other (specify)	State Zip Code SC 29464  C  Occupation (for Individual) Musician  Aggregate Year-to-Date ▼  650.00	Date of Receipt  03 27 2021  Transaction ID: SA11AI.41180  Amount of Each Receipt this Period  50.00  Memo Item
Chesmore, Greg, A., ,  Mailing Address 5018 Flambeau Road  City  Madison  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Acceleron Pharma  Receipt For:  Primary  Other (specify)	State Zip Code 53705-1302  C  Occupation (for Individual) Vice President  Aggregate Year-to-Date ▼	Date of Receipt  03
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	600.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

F	TOTT EITHE TOMBETT.					PAGE		8	OF	18
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	Statements may not be sold or used by any persone name and address of any political committee to					
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC						
Full Name of Individual (Last, First, Middle I Dobrzenski, Frank, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 5304 Sapphire Springs Drive	e	03 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID : SA11AI.41050				
Knightdale	NC 27545-7585	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	150.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Expedient Resource Services	Principal					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	450.00					
Full Name of Individual (Last, First, Middle I Hegeman, Carmen, B., ,	Date of Receipt					
Mailing Address 809 La Cruz Drive	uling Address 809 La Cruz Drive					
City	State Zip Code	03 10 2021  Transaction ID : SA11AI.41073				
El Paso	TX 79902-1720	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Attorney	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name of Individual (Last, First, Middle I Jewell, Colette, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 2515 East Princeton Avenue	9	03 23 2021				
City	State Zip Code	Transaction ID : SA11AI.41159				
Visalia	CA 93292	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer (for Individual) Information requested per best efforts	Occupation (for Individual) Information requested per best efforts	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	300.00					
SUBTOTAL of Receipts This Page (optional)		350.00				
TOTAL This Period (last page this line number	or only)					

Use separate schedule(s) for each category of the Detailed Summary Page

					PAGE	9	OF		18	
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	ny information copied from such Reports and State for commercial purposes, other than using the n							
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC							
Α.	Full Name of Individual (Last, First, Middle Initia Micek, Joe, , ,	l) or Full Org	Date of Receipt					
	Mailing Address 7709 Cedar Island Road			03 15 2021				
	City	State	Zip Code	Transaction ID : SA11AI.41095				
	Bellevue	NE	68147-2011	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		500.00				
	Name of Employer (for Individual) Information requested per best efforts	Occup: Inform	Memo Item					
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00					
В.	Full Name of Individual (Last, First, Middle Initia Minks, Rachel, , ,  Mailing Address 17024 Barium Street Northwest							
		03 16 2021						
	City Andover	State MN	Zip Code 55304	Transaction ID : SA11AI.41114  Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual) Information requested per best efforts		ation (for Individual) nation requested per best efforts	Memo Item				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 750.00					
<u> </u>	Full Name of Individual (Last, First, Middle Initia Morris, Joey, , ,	l) or Full Org	anization Name	Date of Receipt				
<b>.</b>	Mailing Address 16096 Keeney Dr			03 02 7 2021				
	City Fairhope	State AL	Zip Code 36532	Transaction ID : SA11AI.41055  Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		200.00				
	Name of Employer (for Individual) Morris Cary Andrews	Occup: Attorne	ation (for Individual)	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 1200.00					
S	SUBTOTAL of Receipts This Page (optional)			950.00				
Т	OTAL This Period (last page this line number on	nly)		2075.00				

### 17

SCHEDULE B (FEC Form 3X)	11	anaka askasil ( )	FOR LIN	E NUMBER:	PAGE 10 OF 18			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only one)					
		Summary Page	<b>X</b> 21		23 28c	26 27 29 30b		
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Any information copied from such Reports and Stater or for commercial purposes, other than using the name of the commercial purposes.								
NAME OF COMMITTEE (In Full)								
WOMEN SPEAK OUT PAC								
Full Name (Last, First, Middle Initial)								
A. Anedot, Inc					Date of Disbursement			
					M M / D D / Y Y Y Y			
Mailing Address 1340 Poydras Street				03	03 31 2021			
Suite 1770 City	State	Zip Code						
New Orleans	LA	70112		FEC Id	entification N	lumber		
Purpose of Disbursement Credit Card Processing Fees				C				
Candidate Name						: SB21B.41209		
Canuluate Ivallie			Category/ Type	Amount	of Each Di	sbursement this Period		
Office Sought: House Disburser	ment For:		Type		270.92			
Senate	Primary	General			75 75 75			
State: District:	Other (spe	cify) 🔻		Me	mo Item			
Full Name (Last, First, Middle Initial)				+-				
B. Direct Mail Processors, Inc.				Date of	Disburseme	ent		
				M = M	M = M / D = D / Y = Y = Y			
Mailing Address 1150 Conrad Court				03	05	2021		
,	State	Zip Code		FEC Id	entification N	Number		
Hagerstown Purpose of Disbursement	MD	21740		C				
Direct Mail Processors Fee & Thank You Notes  Candidate Name  Category/ Type  Office Sought: House Disbursement For:					naastian ID	· CD24D 44206		
					Transaction ID : SB21B.41206 Amount of Each Disbursement this Period			
						874.01		
Office Sought: House Disburser  Senate	Primary	General			7	074.01		
President Other (specify)				I Ma	ma Itam			
State: District:				Ivie	mo Item			
Full Name (Last, First, Middle Initial)				Data at	Diahowaana			
C. Direct Mail Processors, Inc.				M M	Disburseme			
Mailing Address 1150 Conrad Court				03	17	2021		
City	State	Zip Code		F50	a malifi a cali a ma	l		
Hagerstown	MD	21740		_	entification N	vuiiDei		
Purpose of Disbursement Direct Mail Processors Fee and Thank You Notes								
Candidate Name					Transaction ID : SB21B.41207 Amount of Each Disbursement this Period			
			Category/ Type	Amount	OI LACII DI	Soursement this Fellou		
	ment For:				4	711.48		
Senate President	Primary Other (spe	General						
State: District:	Other (spe	city) ▼		Me	mo Item			
SUBTOTAL of Disbursements This Page (optional)				L	-	1856.41		
TOTAL This Darks Life								
<b>TOTAL</b> This Period (last page this line number only)	)							

### 17

Use separate schedule(s)   Check only one)   Check one)	SCHEDULE B (FEC Form 3X)	anata aab - dul - ( )	FOR LI	FOR LINE NUMBER: PAGE				AGE	11 OF	18	
Detailed Surmary Page	ITEMIZED DISBURSEMENTS			(OILCON	(check only one)			_	l 07		
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Pull)  WOMEN SPEAK OUT PAC  Full Name (Last, First, Middle Initial)  A. Susan B Anthony List, Inc.  Mailing Address 2800 Shirington Rd Site 1200  City Arington Purpose of Disbursement Office Stuphits  Candidate Name  Category/ Type  District  Full Name (Last, First, Middle Initial)  B.  Date of Disbursement  Category/ Type		Detailed	Summary Page			J ∟					
or for commercial purposes, other than using the name and aodress of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Fall)  WOMEN SPEAK OUT PAC  Full Name (Last, First, Middle Initial)  A Susan B Anthony List, Inc.  Mailing Address 2800 Shrifington Rd Sist 1200  City Arington VA 2206  Category/ Office Sought:  Full Name (Last, First, Middle Initial)  B.  Disbursement For:  State:  District  Full Name (Last, First, Middle Initial)  B.  Date of Disbursement  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Category/ Office Sought:  Full Name (Last, First, Middle Initial)  Category/ Type  Office Sought:  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identification Number  Cl  Amount of Each Disbursement this Period  Fec Identifica	Any information copied from such Benerte and State	mente morr	not be sold or								ne
WOMEN SPEAK OUT PAC  Full Name (Last, First, Middle Initial)  A. Susan B Anthony List, Inc.  Mailing Address 2800 Shirlington Rd Siste 1200  City  State  VA  Z2206  Purpose of Disbursement  Office Sought: House Pirsident  Candidate Name  Office Sought: House Pirsident  State: District:  Full Name (Last, First, Middle Initial)  B.   Date of Disbursement this Period  Transaction ID: S8218-11202  Amount of Each Disbursement  Category' Type  Office Sought: House Pirmany Office Sought: Momo Item  Subtrotal of Disbursement this Period  Memo Item  Memo Item  Memo Item  Subtrotal of Disbursement this Period  Memo Item  Memo Item  Memo Item											
A. Susan B Anthony List, Inc.  Mailing Address 2800 Shirington Rd Sus 1200  City State Zip Code Arlington VA 22206  Purpose of Disbursement Office Supplies  Candidate Name  City State: Distric:  Full Name (Last, First, Middle Initial)  B. Mailing Address  City State: Distric:  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State: Distric:  Full Name (Last, First, Middle Initial)  Senate President Other (specify)    State: Distric:  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State: Distric:  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State: Distric:  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State: Distric:  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State: Distric:  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State: Distric:  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State: Distric:  State: Distric:  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State Zip Code  Purpose of Disbursement  Cardidate Name  Category/ Type  Office Sought: House Senate President State: Distric:  Senate President Other (specify)    Memo Item  FEC Identification Number  C. Amount of Each Disbursement inis Period  FEC Identification Number  C. Amount of Each Disbursement inis Period  Memo Item  Substruction Number  C. Amount of Each Disbursement inis Period  Memo Item  Substruction Number  Memo Item  Substruction Number  Memo Item  Memo Item	NAME OF COMMITTEE (In Full)										
A. Susan B Anthony List, Inc.  Mailing Address 2800 Shirlington Rd Site 1200  City City City City City City City Cit	<u>/</u>										
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# SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 12 OF 18

FOR LINE 13 OF FORM 3X

		TOTT LINE 13 OF TOTHWI 5X		
IAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		Transaction ID : SC/10.9700		
LOAN SOURCE Full Name (Last, Fi Susan B Anthony List, Inc.	rst, Middle Initial)	N		
Mailing Address 2800 Shirlington Rd Ste 1200		Other (specify) ▼		
City	State	ZIP Code		
Arlington	VA	22206		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
77452.59	5	0.00 77452.55		
TERMS  Date Incurred	D	ate Due Interest Rate Secured:		
M 11 M / 30 D / Y 2017	M = M / D = D	/ 11/30/2021 0.00 % (apr) Yes <b>✗</b> No		
List All Endorsers or Guarantors (if				
1. Full Name (Last, First, Middle Initia	al)	Name of Employer		
Mailing Address		Occupation		
City	tate ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initia	al)	Name of Employer		
Mailing Address		Occupation		
City	tate ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initia	al)	Name of Employer		
Mailing Address		Occupation		
City	tate ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initia	ıl)	Name of Employer		
Mailing Address		Occupation		
City	tate ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this li	ne only)			
Carry outstanding balance only to LINE	3 Schedule D for this	s line. If no Schedule D. carry forward to appropriate line of Summary		

### SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 13 OF 18

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.13439 WOMEN SPEAK OUT PAC Election: **LOAN SOURCE** Full Name (Last, First, Middle Initial) Susan B Anthony List, Inc. Memo Item Primary General Mailing Address 2800 Shirlington Rd Other (specify) ▼ Ste 1200 State City ZIP Code 22206 Arlington VA Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10118.58 10118.58 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 30 11 2018 11/30/2022 0.00 X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address City State ZIP Code Amount Guaranteed Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City State ZIP Code Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation City ZIP Code State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 10118.58 TOTALS This Period (last page in this line only)..... 87571.13 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 14
FOR LINE NUMBER: (check only one)

	9
X	10

18

OF

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Fees Denton US LLP Mailing Address 1900 K Street NW State Zip Code Washington DC 20006 Transaction ID: SD10.39259 Outstanding Balance Beginning This Period 35089.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 35089.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Direct Mail Processing Fees** Direct Mail Processors, Inc. Mailing Address 1150 Conrad Court City State Zip Code Hagerstown 21740 MD Outstanding Balance Beginning This Period Transaction ID: SD10.40682 874.01 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 874.01 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Estimate digital ads Media Bridge Mailing Address 11300 Astarita Ave City State Zip Code 22534 Partlow VA Outstanding Balance Beginning This Period Transaction ID: SD10.15740 2000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2000.00 37089.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
(check only one)

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18

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Existing Loan owed to SBA Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington VA 22206 Transaction ID: SD10.4157 Outstanding Balance Beginning This Period 10500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 10500.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Loan for FEC Reporting Services Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.4110 5000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 5000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailings Expense Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 Zip Code City State Arlington VA 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.4318

	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
	0.00	0.00	5204.43
1)	SUBTOTALS This Period This Page (optional	)	20704.43
2)	TOTALS This Period (last page this line num	ber only)	
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last page only)	
4)	ADD 2) and 3) and carry forward to appropri	ate line of Summary Page (last page only) ▶	

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**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 16
FOR LINE NUMBER: (check only one)

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18

16 OF

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original transactions put on SBA CC Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.6625 Outstanding Balance Beginning This Period 8610.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 8610.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Expense put on SBA CC Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.6756 4709.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4709.73 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): To post Thrifty Car Rental Expense put on Susan B Anthony List, Inc. SBA Card Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.9222 1894.83 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 1894.83 15214.56 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

	9
X	10

18

17 OF

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Supplies Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington VΑ 22206 Transaction ID: SD10.15960 Outstanding Balance Beginning This Period 200.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 200.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non-Federal - Travel Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 Outstanding Balance Beginning This Period Transaction ID: SD10.15958 27.90 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 27.90 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Salary / Contractor Pay Susan B Anthony List, Inc. Mailing Address 2800 Shirlington Rd Ste 1200 City State Zip Code Arlington 22206 VA Outstanding Balance Beginning This Period Transaction ID: SD10.39334 4324.16 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 4324.16 4552.06 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 18 OF
FOR LINE NUMBER:

FOR LINE NUMBER: (check only one) 9

18

WOMEN SPEAK OUT PAC						
A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose): Legal Fees					
Susan B Anthony List, Inc.	Susan B Anthony List, Inc.					
Mailing Address 2800 Shirlington Rd Ste 1200						
City	State	Zip Code				
Arlington	VA	22206				
Outstanding Balance Beginning This Period 0.00			Transaction ID : SD10.41208			
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period			
4950.00		0.00	4950.00			
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):			
Mailing Address						
City	State	Zip Code				
Outstanding Balance Beginning This Period						
Calciantally Data.iso Dog.immig 11110 1 circu						
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period			
C. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):					
Mailing Address						
City	State	Zip Code				
City	State	Zip Code				
Outstanding Balance Beginning This Period						
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period			
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2) TOTALS This Period (last page this line number only)			82510.05			
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			87571.13			
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶			170081.18			